Enabling Machine Intelligence in Healthcare Through Modern Standards

Piotr Mankowski and Pascal Brandt January 30, 2018 – BIME 533



Our Goals

- > Introduce interoperability & information exchange
- > Describe past & present standards
- > Introduce Web APIs
- > Predict the future 2 >
- > CDS Hooks Hacktivity



Rationale

Electronic Health Data

> Health data first captured electronically in the 60s

> Benefits include accuracy & timely access (and?)

> Data sharing: turns out it's not that easy (why?)



Interoperability

□ Interoperability

- > Extent to which systems and devices can
 - Exchange data
 - Interpret that shared data
- > Essential for
 - Continuity of care
 - Monitoring & Evaluation
 - Public Health Surveillance

- > Systems used to encode clinically data for universal understanding
 - diagnoses
 - orders
 - lab tests and results
 - billing
 - etc.



- > LOINC
 - 66801-2: How well can you tell a funny event to a group of children



- > LOINC
 - 66801-2: How well can you tell a funny event to a group of children
- > SNOMED CT
 - 112630007: Funny looking kid (FLK)



- > LOINC
 - 66801-2: How well can you tell a funny event to a group of children
- > SNOMED CT
 - 112630007: Funny looking kid (FLK)
- > ICD-10
 - V91.07: Burn due to water-skis on fire



> Unified Medical Language System (UMLS)

The UMLS integrates and distributes key terminology, classification and coding standards, and associated resources to promote creation of more effective and interoperable biomedical information systems and services, including electronic health records



Web APIs

Web APIs

- > Application Programming Interfaces
- > Clearly defined protocol for inter-application communication
- > Exists at all levels
 - Operating system
 - Libraries and frameworks
 - Remote (RPC & Web)

REST

- > Representational State Transfer
- > Build on top of HTTP
- > Entities identified by URIs (web URLs)
 - https://api.com/rest/v1/Resource/123
 - https://uwmedicine.org/fhir/stu3/Patient/456



```
https://api.icndb.com/jokes/rai ×
← → C  

Secure https://api.icndb.com/jokes/random
                                          ⊕☆ ♥ ■ :
                                    + - View source 🌼
{
    type: "success",
  - value: {
         id: 68,
         joke: "When Chuck Norris falls in
         water, Chuck Norris doesn't get
         wet. Water gets Chuck Norris.",
         categories: [ ]
```



The Standards

Three Tier Model

- > Tier 1: "Simple" data exchange
 - HL7 V2, HL7 V3, FHIR
- > Tier 2: Application logic and patient data binding
 - SMART on FHIR
- > Tier 3: Omnipotent Clinical Intelligence
 - CDS Hooks



Tier One: Exchange

- > Simple Patient Data Exchange
 - Transport
 - Message
 - Flow



△ Transport

- > TCP/IP
- > SOAP
- > REST



■ ■ Message

- > Health Level Seven (HL7)
 - Non-profit organization est. 1987
- > Standards
 - **1987**
 - > HL7 v2
 - **1985**
 - > HL7 v3
 - > CDA
 - **2013**
 - > FHIR





- > IHE Profiles
 - XDS etc
- > FHIR Profiles
 - Constrain vocabularies and resources



FHIR

- > Actively under development
- > Developer Focused
 - Web Native
 - Great tooling
- > Addresses previous shortcomings
 - Common scenarios
 - Profiles + Extensions
 - Free



FHIR

> FHIR Resources

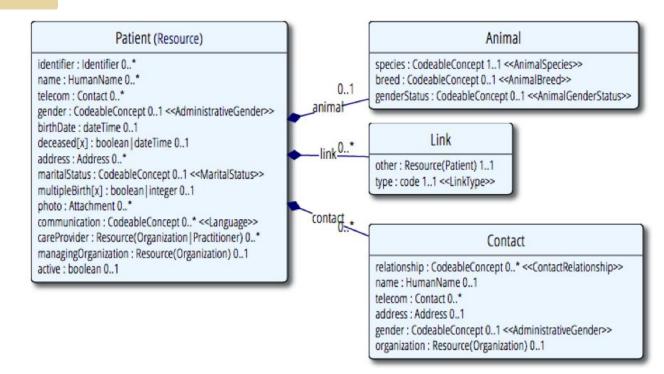
- Patient
- Observation
- Medication
- Practitioner
- Procedure
- 120+ total

> Domains

- Clinical
- Financial
- Specialized (e.g. ResearchStudy)



FHIR



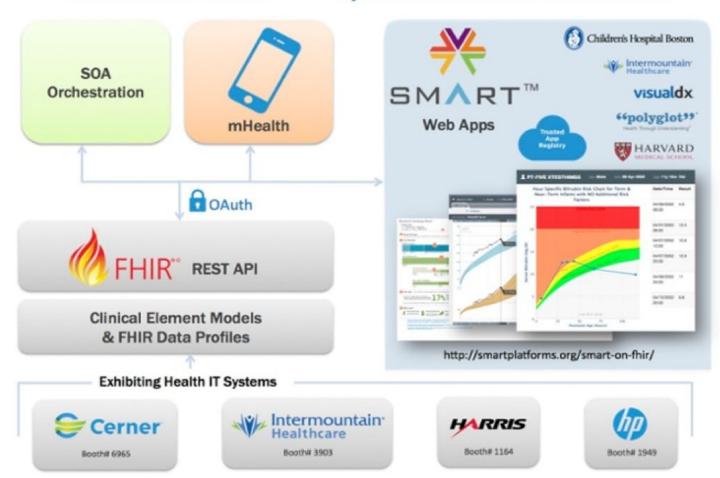


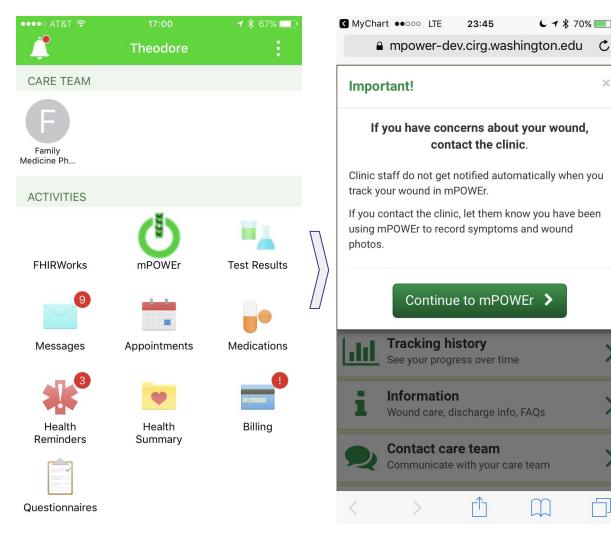
Tier Two: Application Logic

- > Launch app with relevant context
- > Delegate authentication
- > Allow for scope data access



SMART on FHIR®© - Open Platform Architecture







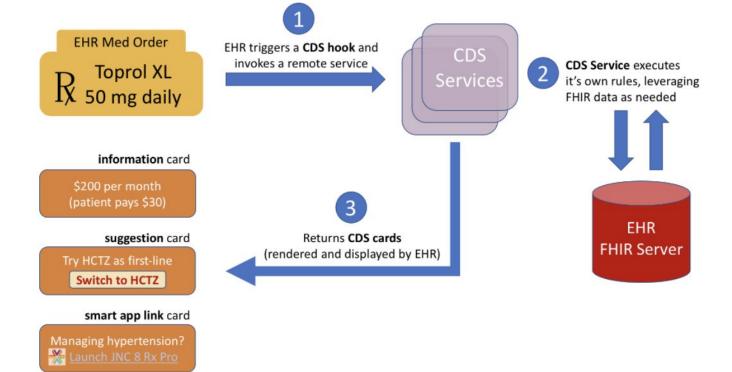
€ 1 * 70% ■ 14

Tier Three: Machine Intelligence

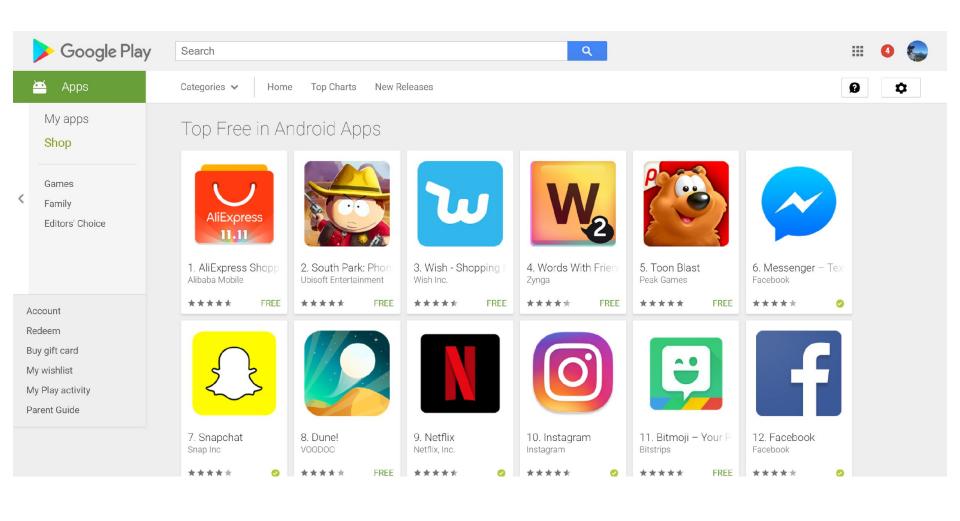
- > Passive monitoring
- > Timely, context-aware decision support
- > Provides
 - Informational alerts
 - Suggestions
 - Ability to launch apps with context



CDS Hooks

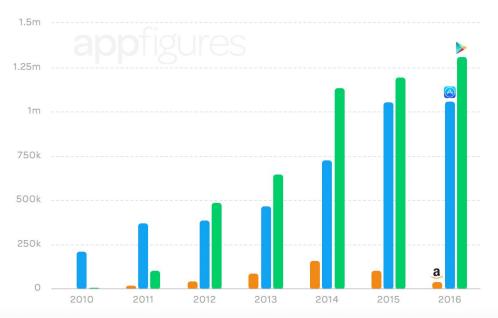


The Future >

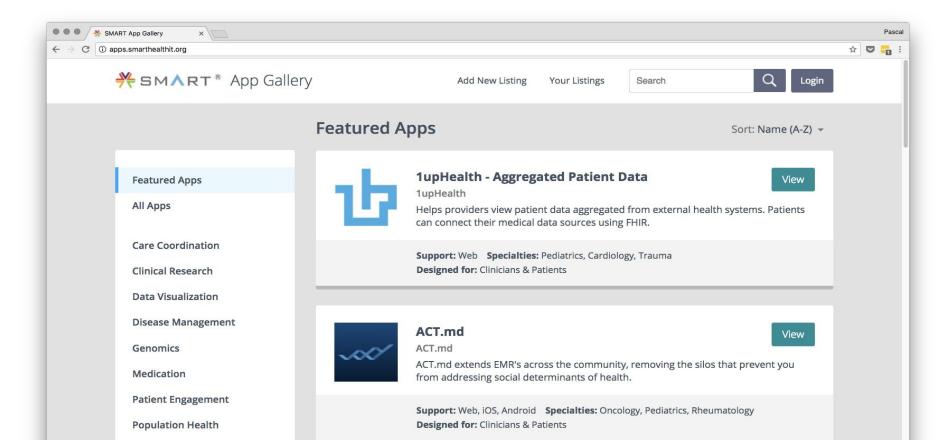


Apple App Store + Google Play Store





SMART App Gallery



Barriers and Open Questions

Open Questions

> What is the best monetization model?

> How do we address fragmentation of app stores?

> Who is responsible for quality control of apps?

> How do we catalog and disseminate useful applications?

Thank You!

CDS Hooks Hactivity

Resources:

psb.re/fhir